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CONFIRMATION NO. 9235

Bib Data Sheet

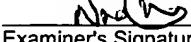
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APPLICANTS

Conrado Blasco Allue, Austin, TX;
 Paul Kimelman, Alamo, CA;
 Andrew Brookfield Swaine, Cambridge, UNITED KINGDOM;
 Richard Roy Grisenthwaite, Cambridgeshire, UNITED KINGDOM;

**** CONTINUING DATA *********** FOREIGN APPLICATIONS *********IF REQUIRED, FOREIGN FILING LICENSE GRANTED**

** 05/31/2004

Foreign Priority claimed	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no		
35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance		
Verified and Acknowledged	Examiner's Signature 		
	Initials		
STATE OR COUNTRY	SHEETS DRAWING	TOTAL CLAIMS	INDEPENDENT CLAIMS
TX	4	22	2

ADDRESS

23117

TITLE

Forced diagnostic entry upon power-up

FILING FEE RECEIVED 936	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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